Case 2:17-bk-54225 Doc 37 Filed 11/21/17 Entered 11/21/17 15:38:16 Desc Main Document Page 1 of 2

Fill	in this information t	o identify your c	ase:										
Del	btor 1												
	btor 2 buse, if filing)					_							
Uni	ited States Bankrup	tcy Court for the	: SOUTHERN DISTRIC	CT OF OHIO									
Cas	se number 2:1	7-bk-54225					Check if this	is:					
(If known)				_			An amer	ded filing					
									ng postpetitior following date				
\bigcirc	fficial Form	1061							ioliowing date	•			
	chedule I:		omo				MM / DD	/ YYYY		12/1			
sup spo atta	plying correct info use. If you are sep ch a separate shee	ormation. If you parated and you	sible. If two married pec are married and not fili ir spouse is not filing w On the top of any additi	ng jointly, and your s ith you, do not includ	pouse i e inforr	s living v	with you, in bout your s	clude infor pouse. If n	rmation about nore space is	t your needed,			
1.	Fill in your empl	oyment											
	information.			Debtor 1	_				Debtor 2 or non-filing spouse				
	If you have more attach a separate		Employment status	■ Employed		☐ Employed ☐ Not employed							
	information about employers.	additional		☐ Not employed	LI NO	employed							
		cocconcl or	Occupation	Cleaner									
	Include part-time, self-employed wo		Employer's name	1099 Employee									
	Occupation may i or homemaker, if		Employer's address										
			How long employed t	here? 16 years	;								
Pai	rt 2: Give De	tails About Mor	nthly Income										
	mate monthly incouse unless you are		ate you file this form. f	you have nothing to re	port for	any line,	write \$0 in t	he space. Ir	nclude your no	n-filing			
	ou or your non-filing e space, attach a se		ore than one employer, co this form.	ombine the information	for all e	mployers	s for that pe	son on the	lines below. If	you need			
						For	For Debtor 1 For Debtor 2 or non-filing spouse						
2.			ry, and commissions (b calculate what the month		2.	\$	0.0	D \$	N/A	-			
3.	Estimate and list monthly overtime pay.				3.	+\$	0.0) +\$ _	N/A	-			
4	Calculate gross	Income Add lir	ne 2 + line 3		4	s	0.00	\$	N/A	1			

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Deb	tor 1	Tia D. Blankenship	-	C	Case number (if kr	own)	2:17-	bk-542	25	
	Con	av line 4 hore	4.		For Debtor 1	0.00		Debtor :		
		ly line 4 here	4.		Ψ	.00	Ψ		IN/ <i>F</i>	<u> </u>
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a			0.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		. —	0.00	\$_		N/A	
	5c. 5d.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	5c. 5d			0.00	\$ \$		N/A	_
	5e.	Insurance	5e		·	0.00	\$		N/A	
	5f.	Domestic support obligations	5f.		·	0.00	\$_		N/A	_
	5g.	Union dues	5g			0.00	\$		N/A	
	5h.	Other deductions. Specify:	_ 5h	.+	\$ 0	.00	+ \$		N/A	<u> </u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$.00	\$		N/A	<u>4</u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$.00	\$		N/A	<u>4</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
	٠.	monthly net income.	8a		\$ 3,055		\$		N/A	
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent	8b	•	\$	0.00	\$		N/A	<u>4</u>
		regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		. —	0.00	\$		N/A	
	8d. 8e.	Unemployment compensation Social Security	8d 8e			0.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:				0.00	\$ \$		N/A	_
	8g.	Pension or retirement income	– 8g		·	0.00	\$ 		N/A	
	8h.	Other monthly income. Specify: Cleaning 1099 Income	8h		\$ 2,942				N/A	
		<u> </u>		Г						_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	5,997	.00	\$		N,	/A
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	5,997.00	+ \$_		N/A	= \$ _	5,997.00
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe				-	chedule 11.		0.00
12.	2. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies							\$	5,997.00	
									Comb	ined nly income
13.								,		
		Yes. Explain: Debtor's income fluxuates due to the nature of he								me from

Official Form 106I Schedule I: Your Income page 2